

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application: Halperin et al.
 Application No.: 10/791,622
 Filed: March 2, 2004
 For: Brain Therapy

Confirmation No. 3149
 Group Art Unit: 3768
 Examiner: Michael Rozanski

Date: January 9, 2008

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

☒ Applicant filed application with claim of small entity status. See 37 CFR §1.27.

☐ No additional fee is required.

☒ The fee has been calculated as shown below:

(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	26	24	= 2	x 25=	\$ 50.00	x 50=	\$.00
Indep	4	4	= 0	x105=	\$	x210=	\$.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+185=	\$	+370=	\$
				Total Add. Fee	\$ 50.00	OR Total	\$.00

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.


** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

Attorney Docket No.: 9450-19CT
Application No.: 10/791,622
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Page 2

- ☒ Please charge my Deposit Account No. 50-0220 in the amount of **\$50** for additional claims.
- ☒ The Commissioner is hereby authorized to charge the appropriate fees associated with this communication or credit any overpayment to Deposit Account No. 50-0220.

Respectfully submitted,


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CERTIFICATION OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4) to the U.S. Patent and Trademark Office on January 9, 2008.

Signature: 
Rosa Lee Brinson

Attorney Docket No. 9450-19CT

PATENT

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**AMENDMENT AND RESPONSE TO
OFFICE ACTION DATED SEPTEMBER 13, 2007**

Sir:

Responsive to the Office Action dated September 13, 2007, please amend the above-identified application as shown.

If any extension of time for the accompanying response or submission is required, Applicant requests that this be considered a petition therefor. The Commissioner is hereby authorized to charge any additional fee, which may be required, or credit any refund, to our Deposit Account No. 50-0220.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this document.

Remarks begin on page 8 of this document.